PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10751221

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
[- .			(Column 1) (Col			ımn 2)	2) TYPE			OR	SMALL	ENTITY
TOTAL CLAIMS .			L (RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20= *		* -			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =					X43=		OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in o			column 2	L	TOTAL	271	OR	TOTAL	
CLAIMS AS AMENDED - PART II										4	OTHER	THAN
		(Column 1)	·	(Column 2) (Column 3)				SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OŘ	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L	TOTAL			TOTAL	
		(Column 1)		(Columi	n 2\	(Column 3)	AL	DDIT. FEE] • · · ·	ADDIT. FEE	
~		CLAIMS		HIGHE	ST	·		1	ADDI-	1	I	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		= .		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
		•					Ŀ	+145=		OR	+290=	
					-		AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
			,									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .	;	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=		OR		
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL DDIT. FEE	
l	t tne "Highest Nur "he "Highest Num	mber Previously Pa ber Previously Paid	id For" IN THIS I For" (Total or	SPACE is la Independent	ess than t) is the l	n 3, enter "3." highest humber		DIT. FEE L in the appr	opriate box			